722 Moody, County Courthouse, Galveston, Texas 77550 (409) 766-2244

Mark Henry Patrick Doyle Kevin O'Brien Stephen Holmes Ken Clark
County Judge Commissioner, Precinct 1 Commissioner, Precinct 2 Commissioner, Precinct 3 Commissioner, Precinct 4

SPECIAL MEETING-AGENDA MARCH 22, 2012 – 3:00 P.M.

In accordance with the provisions of the Americans with Disabilities Act (ADA), persons in need of a special accommodation to participate in this proceeding shall, within three (3) days prior to any proceeding contact the County Judge's office at 722 Moody, Galveston, Texas 77550 (409) 765-2244.

- 1. Call to Order Specially Scheduled Meeting 3:00 p.m.
- 2. Break into Executive Session: Executive Session: The Commissioners Court will enter into executive session as permitted under the Texas Open Meetings Act, Texas Government Code Section 551.071 Consultation with Attorneys regarding pending litigation or settlement offer for:
 - a. —Civil Action No. 1:11-cv-01837-ABJ-JRM-RMC, Galveston County, Texas v. United States of America, et al, pending in the United States District Court for the District of Columbia.
 - b. —Civil Action No. 3:11-cv-00511, Petteway, et al v. Galveston County, Texas, et al, pending in the United States District Court for the Southern District of Texas.
- 3. Return to Specially Scheduled Meeting.
- 4. Consideration of settlement of Civil Action No. 1:11-cv-01837-ABJ-JRM-RMC, Galveston County, Texas v. United States of America, et al, pending in the United States District Court for the District of Columbia.

5. <u>Community Services</u>

a. Consideration of approval of the FY 2012 Tobacco Settlement Report and authorizing the County Judge to sign the final submission documents.

6. **Housing Department**

- a. Consideration of Approval of Change Orders associated with the Reconstruction and/or Rehabilitation of various houses.
- 7. Adjourn Special Meeting.

Appearances before Commissioners Court

a. 3minutes

A speaker whose subject matter as submitted relates to an identifiable item of business on this agenda will be requested by the County Judge or other presiding court member to come to the podium where they will be limited to three minutes (3). A speaker whose subject matter as submitted does not relate to an identifiable item of business on this agenda will be limited to three minutes (3) and will be allowed to speak before the meeting is adjourned. Please arrive prior to the meeting and sign in with the County Clerk.

AGENDA ITEM

#4

NO BACK – UP PROVIDED

AGENDA ITEM #5a



COUNTY OF GALVESTON Community Services Division

Connie Nicholson, Director

March 16, 2012

The Honorable Mark Henry, County Judge And the Honorable Commissioner's Court The Galveston County Courthouse 722 Moody Galveston, Jexas 77550

Gentlemen

Attached please find the 2012 Tobacco Settlement Report of the County Health Related Expenses

This year's report shows spending in calendar year 2011 for non-reimbursed healthcare is at \$14,130,101.06. This includes a 15% administrative cost adjustment that brings the County's submission to \$16,249,616.21. This report has been reviewed by the Auditor's Office and we have determined the 2012 submission is up this year due to increased UPL payments and the decrease in other sources of reimbursement.

In 2011 the County submitted \$14,505 094 89 shared the receipt of some \$51,000,000 available funds. I anticipate the receipt of funds to be around April 20, 2012.

If you have additional questions, please do not hisitate to contact me

Respectfully,

Connie Nicholson

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PRO RATA TOBACCO SETTLEMENT DISTRIBUTION COUNTY EXPENDITURE STATEMENT – 2012

www dshs state tx us/tobaccosettlement

Name of County County o	f Galveston		
Provide the calendar year 2011 unrei	mbursed health	care ev	menditures for your county within the
categories designated below. The Agree these expenditures shall be calculated	ement Regarding	Disposi	tion of Settlement Proceeds states that
"The total annual unreimbursed within a hospital district are defin jail health care, expended by suduring that year plus 15% of the	health care exper led as all unreimble lich county for hea	irsed an	nounts, including unreimbursed
Allowable Expenditure Categories			
A County indigent health care services		\$	\$5,905,856.84
B ¹ Unreimbursed jail health care		\$	\$4,210,776.90
C ² Additional unreimbursed personal hi care services provided to the genera (Use Category C Expenditure Worksh to calculate this amount)	l public	\$	\$4,013,467.32
D ³ Other allowable expenditures (This category should ONLY be comp the <i>Non-Hospital District Public Hosp Expenditure Statement</i> regarding the lease of a public health care facility a you—if applicable, insert the total from of that form in this category.)	oital e sale or applies to	\$	\$0.00
Total allowable expenditures: (Expenditure Categories A+B+C+D)		\$	\$14,130,101.06
	X 1.15 =		\$16,249,616.21 nount claimed by county for rata distribution in 2012)

Pro Rata Tobacco Settlement Distribution County Expenditure Statement – 2012

¹Unreimbursed jail health care expenditures may be calculated using either of the following two methods. The total may include unreimbursed health care expenditures for juveniles held under. Court commitment at county expense. Indirect costs must be excluded from the calculation.

- (1) determine the total expenditures based on itemized health care expenses for prisoners over the entire year, subtracting any reimbursement received from entities outside your political subdivision to cover health care expenses for individual prisoners, or
- (2) determine the total expenditures based on itemized health care expenses for the entire year and apply the following formula

Total Prisoner Health Care x <u>Unreimbursed Jail Population</u> = <u>Unreimbursed Health Care Expenses</u>
Total Jail Population

Attach a worksheet indicating which of the above methods you used to calculate unreimbursed jail health care expenditures, as well as the base numbers for your calculation

²Expenditures in Category C must be for services such as a hospital district may provide. These are typically diagnostic and treatment services for individuals. Health care education, outreach, screening, laboratory services, counseling, and case management may be counted. Environmental services, such as mosquito control, water testing, and septic tank inspection may not be counted. Expenditures for population-based services not involving direct contact with an individual health care recipient, such as restaurant inspection, must also be excluded.

Complete the Attachment (page 4 of 4 of this expenditure statement), indicating the base numbers for your calculation of Category C expenditures

³Note the following additional provision in the tobacco settlement agreement, Section 5 B(4)

"To the extent not already included, a political subdivision shall be eligible to include expenditures from the political subdivision reserve funds and other expenditures, to the extent they are verifiable, which are attributable to proceeds from the sale or lease of public health care facilities. To the extent that proceeds from the sale or lease of public health care facilities are represented by contractually obligated health care services for indigent residents of the political subdivision performed by the purchaser or lessee, such services shall be valued as if they had been reimbursed at Medicaid rates."

If the above provision is applicable to your political subdivision, complete and attach the **Non-Hospital District Public Hospital Expenditure Statement** indicating the <u>base numbers for your calculation of</u>

<u>Category D expenditures</u>

Pro Rata Tobacco Settlement Distribution County Expenditure Statement – 2012

The deadline for submission of this form to the Texas Department of State Health Services (DSHS) is **March 31, 2012** The target date for payment by the Comptroller of Public Accounts to the political subdivisions, based on this information, is no later than April 30, 2012

The information submitted on this form is subject to audit by the State of Texas. If ineligible expenditures are identified through an audit following payment to a political subdivision, the ineligible amount may be deducted from the subsequent year's payment to that political subdivision.

This is to certify that the above expenditures are eligible for pro rata payment in accordance with

the Agreement Regar American Tobacco Co	• •	of Settlement Proceeds between the St	ate of Texas and
Name of County	Galveston		
Name of Certifying Office	cer <u>The H</u>	lonorable Mark Henry	
Certifying Officer's Title	County Judge		
Certifying Officer's Sigr	nature/Date	Such Monny	March 20, 2012
Telephone Number(409) 766-2244	Email mark henry@co galveston tx us	

If you chose to have your completed signed expenditure statement (1) hand delivered or (2) faxed or (3) emailed to DSHS, it must be received no later than 5:00 p.m., March 31, 2012. If you elect to mail (via the U.S. Postal Service) or ship (via a commercial mail service) your completed signed expenditure statement, the postmark must reflect a date no later than midnight, March 31, 2012. STATEMENTS THAT DO NOT INCLUDE A SIGNATURE WILL NOT BE ACCEPTED. Statements are to be addressed to:

Texas Department of State Health Services Funds Coordination & Management Attn: Meghan Lyons, MC 4501, Rm. T-511 1100 W 49th Street, Austin, TX 78756 PO Box 149347, Austin, Texas 78714-9347

You may direct any questions to Ms. Lyons at the above address or by telephone, fax, or email as follows:

Telephone Number: 512,776,2877

Fax. 512 776.7774

Email: meghan lyons@dshs state.tx us

DSHS WILL ACKNOWLEDGE IN WRITING THE RECEIPT OF ALL COMPLETED SIGNED EXPENDITURE STATEMENTS

Pub No EF29-12280 Revised 11/11

Category C Expenditure Worksheet

On the appropriate line below, enter the base numbers for your county's additional unreimbursed personal health care services provided to the general public during <u>calendar year</u> 2011. Any unreimbursed expenditures that you made from a trust fund or reserve account for the provision of health care services may also be included below.

(1) Health care clinic, laboratory, and case management services	\$	254,351 81	
(2) Dental care services	\$	0 00	
(3) Outreach and prevention efforts related to tobacco use, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature		0 00	and the second s
(4) Other health care outreach and prevention efforts, including but not limited to media campaigns, education, counseling, and production and distribution of promotional literature. Typical target areas for these efforts include health hazards affecting the general public.	\$	0 00	
(5) Medical transportation	\$	1,179,004 43	·
(6) Behavioral or psychiatric health care services	\$	934,876 74	
(7) Capital expenditures for health care services	\$	0 00	
(8) Overhead costs for a health care facility	\$ \$	86,993 76	, , , , , , , , , , , , , , , , , , ,
(9) Emergency medical services	\$	1,330,990 00	
(10) Medical supplies or equipment used for the provision of health care services to the general public	\$	47,883 67	
(11) Other services provided by the county which are also within the scope of services that hospital districts are authorized by law to provide. These will typically be diagnostic and treatment services. Describe:	\$	71,522 31	
(12) Intergovemmental transfer payment(s)	\$	107,844 60	

TOTAL FOR CATEGORY C

\$ 4,013,467 32 (Insert this amount under Category C on page 1)

Pub No EF29-12280 Revised 11/11

AGENDA ITEM #6a

RE Agenda Item #? - Consideration of Approval of various Change Order associated with the Reconstruction and Rehabilitation of various Houses submitted by the Housing Department (CC Agenda 3/20/12)

		Contract) Description	(REHAB) Electrical, flatwork, doors & windows, HVAC, 16,318 19 \$ 65,786 90 \$ 82,105 09 0 25% and plumbing repairs needed
"% of Change	(Amt/Orig	Contract)	0 25%
itract	SMOUS	Amount CO Amt (less Gap) Amt Plus CO	86 90 \$ 82,105 09
Original Contract	Amt or + Previous	CO Amt (less	\$ 65,7
		Amount	16,318 19
			<∕>
		#	1
		Appl ID#	10797
		Ċţź	Texas City
		Builder	One80Lonestar